



Benedict College
Office of Student Financial Aid and Scholarships
 1600 Harden Street, Columbia, SC 29204 • 803/705-4418 • 803/705-6629 (Fax)

2016-2017 DEPENDENT VERIFICATION WORKSHEET

Your application was selected for review in a process called *verification*. In this process we compare and confirm the information that you and/or your parent(s) provided on the FAFSA to ensure its accuracy. The law says we have a right to ask you for this information before awarding Federal Aid. If there are differences between your FAFSA information and your financial documents, you or the school may need to make corrections electronically. **We cannot continue processing your financial aid application until all requested information is received and completed.** Please fax these requested documents to **803/705-6629** or mail to the address on the second page of this form.

Section A: Information about You

Print the information requested below:

Student's Full Name	Student's ID/ Social Sec. #	Date of Birth
Student's Home Phone #	Student's Cell Phone #	Student's E-mail Address
Permanent Address: _____ City: _____ State: _____ Zip: _____		

Section B: Information about You & Your Family

Print the information requested below: **Do not leave this section blank.**

1. Parent(s)/Stepparents(s) **current** marital status:

Married/Remarried
 Single
 Divorced/Separated
 Widowed

Month and year your parent/stepparent were married separated, divorced or widowed _____/_____

2. List the people whom your parent(s)/stepparents will support between July 1, 2016 and June 30, 2017. Write in the name of the college for anyone you listed here (*excluding your parents*) that will be attending college at least half-time between July 1, 2016 and June 30, 2017. *If you need more space, attach a separate page that includes the student's name and Social Security Number at the top.*

This includes:

- a. **Yourself and Your parent(s)/stepparent (even if you do not live with your parents).**
 1. If this parent is remarried as of today, answer the questions below about the parent and the person whom your parent married (stepparent). **Grandparents and legal guardians are not considered parents.**
 2. If your parents are divorced or separated, answer the questions about the parent you lived with more during the past 12 months. (If you did not live with one parent more than the other, give answers about the parent who provided more financial support during the past 12 months or during the most recent year that you actually received support from a parent.)
- b. **Parent's other children**, even if they don't live with your parent(s), if (a) your parents will provide more than half of their support from July 1, 2016 through June 30, 2017, or (b) the children would be required to provide parental information when applying for Federal Student Aid, and
- c. **Other people if:** They now live with your parent(s)/stepparent and your parents provide more than half of their support and will continue to provide more than half their support from July 1, 2016 through June 30, 2017.

Please list all family members as indicated below (Yourself, parents, siblings, other dependents, etc.)

Full Name	Age	Relationship to Student	College attending in 2016-2017
1.		Self	Benedict College
2.		Parent/Stepparent	N/A
3.			
4.			
5.			
6.			
7.			

Section C: Student's Filing Status

Order IRS Tax Return Transcript by phone: 1-800-908-9946 or online at www.irs.gov

Check all that apply

- Has not yet filed a 2015 Federal tax return. Must provide a copy of the IRS Tax Return Transcript or use the IRS Data Retrieval Tool after filing.
- Has filed a 2015 Federal tax return and used the IRS Data Retrieval Tool and/or an IRS Tax Return Transcript is will be provided.
- Was not employed and had no income from work for 2015.
- Was employed in 2015 and **will not** and **am not** required to file a Federal tax return.*

*Tax Return Non-filers – Complete chart below if the student will not file and is not required to file a 2015 income tax return with the IRS.

Name of Employer	2015 Amount Earned	IRS W-2 Attached?
		<input type="checkbox"/> Yes <input type="checkbox"/> No - <u>attach separate sheet to explain</u>
		<input type="checkbox"/> Yes <input type="checkbox"/> No - <u>attach separate sheet to explain</u>

Section D: Parent's Filing Status

Order IRS Tax Return Transcript by phone: 1-800-908-9946 or online at www.irs.gov

Check all that apply.

- Has not yet filed a 2015 Federal tax return. Must provide a copy of the IRS Tax Return Transcript or use the IRS Data Retrieval Tool after filing. *If filing status is married filing separately, must submit IRS Tax Return Transcript for both parents.* _____ Mom/StepMom _____ Dad/StepDad
CANNOT use IRS Data Retrieval Tool.
- Has filed a 2015 Federal tax return and an IRS Tax Transcript is attached or will be provided or will use the IRS Data Retrieval Tool. _____ Mom/StepMom _____ Dad/StepDad
_____ Mom/StepMom _____ Dad/StepDad
- Was not employed and had no income from work for 2015.
- Was employed in 2015 but **will not** & **am not** required to file a Federal tax return with the IRS.* _____ Mom/StepMom _____ Dad/StepDad

*Tax Return Non-filers – Complete chart below if the student's parent(s) will not file and is not required to file a 2015 income tax return with the IRS.

Name of Employer	2015 Amount Earned	IRS W-2 Attached?
		<input type="checkbox"/> Yes <input type="checkbox"/> No - <u>attach separate sheet to explain</u> <input type="checkbox"/> Mom/StepMom <input type="checkbox"/> Dad/StepDad
		<input type="checkbox"/> Yes <input type="checkbox"/> No - <u>attach separate sheet to explain</u> <input type="checkbox"/> Mom/StepMom <input type="checkbox"/> Dad/StepDad

Section E: ADDITIONAL PARENTAL VERIFICATION

1. Did at least one person in your parent's household (listed in Section B) receive benefits from the Supplemental Nutrition Assistance Program (SNAP) (formerly known as food stamps) any time during 2015?

- No. No one listed in Section B of my parent's household received SNAP benefits in 2015.
- Yes. Please list the name(s) of the recipient(s) on the line below of the persons listed in Section B of this worksheet who received SNAP benefits in 2015. If requested, I will provide documentation of the receipt of SNAP benefits during 2015.

2. Complete this section if one of the student's parents paid child support in 2015.

- One (or both) of the student's parents listed in Section B of this worksheet paid child support in 2015. The parent has indicated below the name of the person who paid the child support, the name of the person to whom the child support was paid, the names of the children for whom child support was paid, and the total annual amount of child support that was paid in 2015 for each child. If asked by the school, I will provide documentation of the payment of child support. *If you need more space, attach a separate page that includes the student's name and Social Security Number at the top.*

Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Amount of Child Support Paid in 2015
<i>James Smith</i>	<i>Patricia Jones (example)</i>	<i>Jessica Smith</i>	<i>\$6,000.00</i>

Section F: Certification Statement and Signatures

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. **The student and at least one parent must sign. WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.**

X _____
Student Date

X _____
Parent/Stepparent Date

Return completed form and all requested documents to:
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